

Clifton Township

361 State Route 435 Clifton Township PA 18424

Office: 570-842-4272 Email: Secretary@cliftontownship.com

ZONING HEARING BOARD APPLICATION

Full Name: _____

Physical Address: _____

Mailing Address: _____

Email Address: _____ Telephone: _____

Are you a full-time resident of Clifton Township? YES NO

Do you agree to having a Criminal Background check completed? (at Township expense)

YES NO

For the purposes of a background check, please complete the following:

Date of Birth: _____

Social Security Number: _____

Other Names: _____

Signature of Applicant: _____

Date: _____